

County: Lincoln
 PINE CREST NURSING HOME
 2100 EAST 6TH STREET

Facility ID: 7180

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MERRILL 54452 Phone:(715) 536-0355
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/02): 180
 Total Licensed Bed Capacity (12/31/02): 180
 Number of Residents on 12/31/02: 164

Ownership:
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 166

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		
Home Health Care	No					1 - 4 Years		36.6
Supp. Home Care-Personal Care	No					More Than 4 Years		42.1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.6	Under 65	5.5			21.3
Day Services	No	Mental Illness (Org./Psy)	26.8	65 - 74	6.7			-----
Respite Care	Yes	Mental Illness (Other)	2.4	75 - 84	34.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	34.8	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.8	95 & Over	18.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.4		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	29.9	65 & Over	94.5	-----		
Transportation	No	Cerebrovascular	6.1		-----	RNs		9.0
Referral Service	No	Diabetes	8.5	Sex	%	LPNs		3.3
Other Services	No	Respiratory	8.5	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	12.8	Male	22.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	77.4	41.4		
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All	
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%			Per Diem (\$)
Int. Skilled Care	0	0.0	0	1	0.7	131	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.6
Skilled Care	4	100.0	301	120	86.3	112	6	100.0	111	15	100.0	140	0	0.0	0	0	0.0	0	145	88.4
Intermediate	---	---	---	18	12.9	93	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	18	11.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		139	100.0		6	100.0		15	100.0		0	0.0		0	0.0		164	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							

				% Needing				Total	
Percent Admissions from:		Activities of		Assistance of		% Totally		Number of	
Private Home/No Home Health	13.1	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents			
Private Home/With Home Health	10.7	Bathing	1.2	70.7	28.0	164			
Other Nursing Homes	2.5	Dressing	20.1	69.5	10.4	164			
Acute Care Hospitals	65.6	Transferring	36.6	48.2	15.2	164			
Psych. Hosp.-MR/DD Facilities	1.6	Toilet Use	29.3	53.0	17.7	164			
Rehabilitation Hospitals	0.0	Eating	57.9	32.9	9.1	164			
Other Locations	6.6	*****							
Total Number of Admissions	122	Continence		%	Special Treatments	%			
Percent Discharges To:		Indwelling Or External Catheter		5.5	Receiving Respiratory Care	7.9			
Private Home/No Home Health	12.9	Occ/Freq. Incontinent of Bladder		51.2	Receiving Tracheostomy Care	0.0			
Private Home/With Home Health	15.9	Occ/Freq. Incontinent of Bowel		25.0	Receiving Suctioning	0.0			
Other Nursing Homes	2.3				Receiving Ostomy Care	2.4			
Acute Care Hospitals	0.8	Mobility			Receiving Tube Feeding	3.7			
Psych. Hosp.-MR/DD Facilities	0.8	Physically Restrained		1.8	Receiving Mechanically Altered Diets	11.6			
Rehabilitation Hospitals	0.0								
Other Locations	2.3	Skin Care			Other Resident Characteristics				
Deaths	65.2	With Pressure Sores		3.0	Have Advance Directives	100.0			
Total Number of Discharges		With Rashes		9.1	Medications				
(Including Deaths)	132				Receiving Psychoactive Drugs	56.1			

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.2	86.3	1.07	82.4	1.12	83.3	1.11	85.1	1.08
Current Residents from In-County	84.8	75.8	1.12	79.0	1.07	75.8	1.12	76.6	1.11
Admissions from In-County, Still Residing	40.2	27.1	1.48	21.3	1.89	22.0	1.83	20.3	1.98
Admissions/Average Daily Census	73.5	96.4	0.76	130.4	0.56	118.1	0.62	133.4	0.55
Discharges/Average Daily Census	79.5	98.7	0.81	132.8	0.60	120.6	0.66	135.3	0.59
Discharges To Private Residence/Average Daily Census	22.9	41.6	0.55	58.2	0.39	49.9	0.46	56.6	0.40
Residents Receiving Skilled Care	89.0	91.9	0.97	93.4	0.95	93.5	0.95	86.3	1.03
Residents Aged 65 and Older	94.5	87.8	1.08	94.2	1.00	93.8	1.01	87.7	1.08
Title 19 (Medicaid) Funded Residents	84.8	67.7	1.25	73.9	1.15	70.5	1.20	67.5	1.26
Private Pay Funded Residents	9.1	19.7	0.46	17.0	0.54	19.3	0.47	21.0	0.43
Developmentally Disabled Residents	0.6	0.6	1.00	0.8	0.81	0.7	0.84	7.1	0.09
Mentally Ill Residents	29.3	47.5	0.62	34.5	0.85	37.7	0.78	33.3	0.88
General Medical Service Residents	12.8	15.9	0.80	19.0	0.67	18.1	0.71	20.5	0.62
Impaired ADL (Mean)	43.7	47.8	0.91	48.0	0.91	47.5	0.92	49.3	0.89
Psychological Problems	56.1	56.9	0.99	51.4	1.09	52.9	1.06	54.0	1.04
Nursing Care Required (Mean)	4.7	5.9	0.80	6.8	0.69	6.8	0.70	7.2	0.66